

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Middle District Of Georgia

Case number (if known): _____

Chapter you are filing under:

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Leslee

First name

Marsalis

Middle name

Worrell

Last name

Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First name

Middle name

Last name

Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

First name

Middle name

Last name

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx - xx - 1 8 4 6

OR

9 xx - xx - _____

xxx - xx - _____

OR

9 xx - xx - _____

Debtor 1

Leslee Marsalis Worrell

First Name

Middle Name

Last Name

Case number (if known)

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and *doing business as* names

About Debtor 1:

I have not used any business names or EINs.

Business name

Business name

EIN

EIN

About Debtor 2 (Spouse Only in a Joint Case):

I have not used any business names or EINs.

Business name

Business name

EIN

EIN

5. Where you live

142 Old Ridge Road

Number Street

Macon

City

GA

State

31211

ZIP Code

JONES

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

P.O. Box

City

State

ZIP Code

Number Street

City State ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number Street

P.O. Box

City State ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Leslee Marsalis Worrell
First Name Middle Name Last Name

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

8. How you will pay the fee

I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

No

Yes. District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

No

Yes. Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY

Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY

11. Do you rent your residence?

No. Go to line 12.

Yes. Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 Leslee Marsalis Worrell
First Name Middle Name Last Name

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

No. Go to Part 4.

Yes. Name and location of business

Name of business, if any

Number Street

City

State

ZIP Code

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No

Yes. What is the hazard? _____

If immediate attention is needed, why is it needed? _____

Where is the property?

Number Street

City

State

ZIP Code

Debtor 1

Leslee Marsalis Worrell

First Name

Middle Name

Last Name

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Leslee Marsalis Worrell
 First Name Middle Name Last Name

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

No. Go to line 16b.
 Yes. Go to line 17.

16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

No. Go to line 16c.
 Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.

17. Are you filing under Chapter 7?

No. I am not filing under Chapter 7. Go to line 18.

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

No
 Yes

18. How many creditors do you estimate that you owe?

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

19. How much do you estimate your assets to be worth?

<input checked="" type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

20. How much do you estimate your liabilities to be?

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 /s/Leslee Marsalis Worrell

Signature of Debtor 1



Signature of Debtor 2

Executed on 03/14/2019
 MM / DD / YYYY

Executed on _____
 MM / DD / YYYY

Debtor 1 Leslee Marsalis Worrell
First Name Middle Name Last Name

Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/s/ Daniel L. Wilder _____ Date 03/14/2019
Signature of Attorney for Debtor MM / DD / YYYY

Daniel L. Wilder
Printed name

Emmett L. Goodman, Jr., LLC
Firm name

544 Mulberry Street, Suite 800
Number Street

Macon GA 31201-
City State ZIP Code

Contact phone (478) 745-5415 Email address dwilder@goodmanlaw.org

141448 GA
Bar number State

Fill in this information to identify your case and this filing:

Debtor 1	Leslee	Marsalis	Worrell	
	First Name	Middle Name	Last Name	
Debtor 2	(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>Middle District of Georgia</u>				
Case number: _____				

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.
 Yes. Where is the property?

1.1. Street address, if available, or other description

What is the property? Check all that apply.

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

City _____ State _____ ZIP Code _____

County _____

Who has an interest in the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

If you own or have more than one, list here:

1.2. Street address, if available, or other description

What is the property? Check all that apply.

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

City _____ State _____ ZIP Code _____

County _____

Who has an interest in the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

1.3. Street address, if available, or other description		What is the property? Check all that apply.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
		<input type="checkbox"/> Single-family home		
		<input type="checkbox"/> Duplex or multi-unit building		
		<input type="checkbox"/> Condominium or cooperative		
		<input type="checkbox"/> Manufactured or mobile home		
		<input type="checkbox"/> Land		
		<input type="checkbox"/> Investment property		
		<input type="checkbox"/> Timeshare		
		<input type="checkbox"/> Other _____		
City _____ State _____ ZIP Code _____		Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. _____		
County _____		Who has an interest in the property? Check one.		
		<input type="checkbox"/> Debtor 1 only		
		<input type="checkbox"/> Debtor 2 only		
		<input type="checkbox"/> Debtor 1 and Debtor 2 only		
		<input type="checkbox"/> At least one of the debtors and another		
		Other information you wish to add about this item, such as local property identification number: _____		
2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.			<input type="checkbox"/> Check if this is community property (see instructions) \$ _____	
Part 2: Describe Your Vehicles				
Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on <i>Schedule G: Executory Contracts and Unexpired Leases</i>.				
3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles				
<p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes</p>				
3.1. Make: <u>Dodge</u>		Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Model: <u>Charger</u>		<input checked="" type="checkbox"/> Debtor 1 only		
Year: <u>2007</u>		<input type="checkbox"/> Debtor 2 only		
Approximate mileage: <u>220,000</u>		<input type="checkbox"/> Debtor 1 and Debtor 2 only		
Other information:		<input type="checkbox"/> At least one of the debtors and another		
		<input type="checkbox"/> Check if this is community property (see instructions)	<u>\$2,500.00</u> <u>\$2,500.00</u>	
If you own or have more than one, describe here:				
3.2. Make: _____		Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Model: _____		<input type="checkbox"/> Debtor 1 only		
Year: _____		<input type="checkbox"/> Debtor 2 only		
Approximate mileage: _____		<input type="checkbox"/> Debtor 1 and Debtor 2 only		
Other information:		<input type="checkbox"/> At least one of the debtors and another		
		<input type="checkbox"/> Check if this is community property (see instructions)	<u>\$ _____</u> <u>\$ _____</u>	

3.3. Make: _____

Who has an interest in the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Model: _____

Year: _____

Approximate mileage: _____

Other information:
_____ **Check if this is community property (see instructions)**

\$ _____ \$ _____

3.4. Make: _____

Who has an interest in the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Model: _____

Year: _____

Approximate mileage: _____

Other information:
_____ **Check if this is community property (see instructions)**

\$ _____ \$ _____

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories*Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes

4.1. Make: _____

Who has an interest in the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Model: _____

Year: _____

Other information:
_____ **Check if this is community property (see instructions)**

\$ _____ \$ _____

If you own or have more than one, list here:

4.2. Make: _____

Who has an interest in the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Model: _____

Year: _____

Other information:
_____ **Check if this is community property (see instructions)**

\$ _____ \$ _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here ➔

\$2,500.00

Part 3: Describe Your Personal and Household Items**Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

6. Household goods and furnishings*Examples:* Major appliances, furniture, linens, china, kitchenware No Yes. Describe..... Furniture and household goods

\$3,000.00

7. Electronics*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No Yes. Describe..... 2 TVs, computer

\$450.00

8. Collectibles of value*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe..... Coach purse collection

\$400.00

9. Equipment for sports and hobbies*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe.....

\$

10. Firearms*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe.....

\$

11. Clothes*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe..... Clothing

\$200.00

12. Jewelry*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe..... Misc. jewelry items

\$100.00

13. Non-farm animals*Examples:* Dogs, cats, birds, horses No Yes. Describe.....

\$

14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Give specific information.....

\$

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$4,150.00

Part 4: Describe Your Financial Assets**Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

16. Cash*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes.....

Cash:

\$

17. Deposits of money*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes.....

Institution name:

17.1. Checking account:	Bank of America	\$2,457.92
17.2. Checking account:	\$.....
17.3. Savings account:	Bank of America	\$2.00
17.4. Savings account:	\$.....
17.5. Certificates of deposit:	\$.....
17.6. Other financial account:	\$.....
17.7. Other financial account:	\$.....
17.8. Other financial account:	\$.....
17.9. Other financial account:	\$.....

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes.....

Institution or issuer name:

.....	\$.....
.....	\$.....
.....	\$.....

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Yes. Give specific information about them.

Name of entity:

% of ownership:

\$

.....	%	\$.....
.....	%	\$.....
.....	%	\$.....

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

 No Yes. Give specific information about them.....

Issuer name:

_____ \$ _____
 _____ \$ _____
 _____ \$ _____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

 No Yes. List each account separately.. Type of account: Institution name:

401(k) or similar plan:	GEICO	\$8,000.00
Pension plan:	_____	\$ _____
IRA:	_____	\$ _____
Retirement account:	_____	\$ _____
Keogh:	_____	\$ _____
Additional account:	_____	\$ _____
Additional account:	_____	\$ _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

 No Yes.....

Institution name or individual:

Electric:	_____	\$ _____
Gas:	_____	\$ _____
Heating oil:	_____	\$ _____
Security deposit on rental unit:	_____	\$ _____
Prepaid rent:	_____	\$ _____
Telephone:	_____	\$ _____
Water:	_____	\$ _____
Rented furniture:	_____	\$ _____
Other:	_____	\$ _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes.....

Issuer name and description:

_____ \$ _____
 _____ \$ _____
 _____ \$ _____

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

_____ \$ _____
 _____ \$ _____
 _____ \$ _____

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them... _____ \$ _____**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

 No Yes. Give specific information about them... _____ \$ _____**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

 No Yes. Give specific information about them... _____ \$ _____**Money or property owed to you?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years.

2018 Tax Refund

Federal: \$632.00
 State: \$ _____
 Local: \$ _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

 No Yes. Give specific information.

Alimony: \$ _____
 Maintenance: \$ _____
 Support: \$ _____
 Divorce settlement: \$ _____
 Property settlement: \$ _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information.

_____ \$ _____

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

 No Yes. Describe.....

	\$ _____
--	----------

41. Inventory

 No Yes. Describe.....

	\$ _____
--	----------

42. Interests in partnerships or joint ventures

 No Yes. Describe..... Name of entity:

% of ownership:

_____	_____ %	\$ _____
_____	_____ %	\$ _____
_____	_____ %	\$ _____

43. Customer lists, mailing lists, or other compilations

 No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe.....

	\$ _____
--	----------

44. Any business-related property you did not already list

 No Yes. Give specific information

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here →

\$0.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

 No. Go to Part 7. Yes. Go to line 47.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

 No Yes.....

	\$ _____
--	----------

48. Crops—either growing or harvested

 No Yes. Give specific information.

\$

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

 No Yes.....

\$

50. Farm and fishing supplies, chemicals, and feed

 No Yes.....

\$

51. Any farm- and commercial fishing-related property you did not already list

 No Yes. Give specific information.

\$

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here

\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

 No Yes. Give specific information.

\$

\$

\$

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2..... → \$0.00

56. Part 2: Total vehicles, line 5 \$2,500.00

57. Part 3: Total personal and household items, line 15 \$4,150.00

58. Part 4: Total financial assets, line 36 \$11,591.92

59. Part 5: Total business-related property, line 45 \$0.00

60. Part 6: Total farm- and fishing-related property, line 52 \$0.00

61. Part 7: Total other property not listed, line 54 + \$0.00

62. Total personal property. Add lines 56 through 61..... \$18,241.92 Copy personal property total → + \$18,241.92

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

\$18,241.92

Fill in this information to identify your case:

Debtor 1	<u>Leslee Marsalis Worrell</u>	
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the: <u>Middle District of Georgia</u>		
Case number (If known)		

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption.	
Brief description: Checking account Line from <i>Schedule A/B</i> : 17.1	\$2,457.92	<input checked="" type="checkbox"/> \$ 2,457.92 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ga. Code Ann. § 44-13-100(a)(6)
Brief description: Savings account Line from <i>Schedule A/B</i> : 17.3	\$2.00	<input checked="" type="checkbox"/> \$ 2.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ga. Code Ann. § 44-13-100(a)(6)
Brief description: 401(k) Line from <i>Schedule A/B</i> : 21	\$8,000.00	<input checked="" type="checkbox"/> \$ 8,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ga. Code Ann. § 18-4-22

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B			
Brief description: Furniture and household goods	\$3,000.00	<input checked="" type="checkbox"/> \$ 3,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ga. Code Ann. § 44-13-100(a)(4)
Line from Schedule A/B: 6			
Brief description: Misc. jewelry items	\$100.00	<input checked="" type="checkbox"/> \$ 100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ga. Code Ann. § 44-13-100(a)(5)
Line from Schedule A/B: 12			
Brief description: Clothing	\$200.00	<input checked="" type="checkbox"/> \$ 200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ga. Code Ann. § 44-13-100(a)(4)
Line from Schedule A/B: 11			
Brief description: 2 TVs, computer	\$450.00	<input checked="" type="checkbox"/> \$ 450.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ga. Code Ann. § 44-13-100(a)(4)
Line from Schedule A/B: 7			
Brief description: Coach purse collection	\$400.00	<input checked="" type="checkbox"/> \$ 400.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ga. Code Ann. § 44-13-100(a)(6)
Line from Schedule A/B: 8			
Brief description: Whole Life Insurance	\$500.00	<input checked="" type="checkbox"/> \$ 500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ga. Code Ann. § 44-13-100(a)(8)
Line from Schedule A/B: 31			
Brief description: 2018 Tax Refund	\$632.00	<input checked="" type="checkbox"/> \$ 632.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ga. Code Ann. § 44-13-100(a)(6)
Line from Schedule A/B: 28			
Brief description:	\$_____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B:			
Brief description:	\$_____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B:			
Brief description:	\$_____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B:			
Brief description:	\$_____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B:			
Brief description:	\$_____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B:			

Fill in this information to identify your case:

Debtor 1	Leslee Marsalis Worrell	
	First Name	Middle Name
Debtor 2		
(Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the: <u>Middle District of Georgia</u>		
Case number (If known)		

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2.	List all secured claims.	Describe the property that secures the claim:	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	401(k) Loan Creditor's Name 4634 Presidential Parkway Number Street Macon GA 31206 City State ZIP Code	401(k)	\$10,427.00	\$2,500.00	\$7,927.00
		As of the date you file, the claim is: Check all that apply.			
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
		Nature of lien. Check all that apply.			
		<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) <u>First Lien Holder</u>			
	Date debt was incurred	Last 4 digits of account number <u>2 7 0 0</u>			
2.2	Creditor's Name Number Street City State ZIP Code	Describe the property that secures the claim:	\$	\$	\$
		As of the date you file, the claim is: Check all that apply.			
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
		Nature of lien. Check all that apply.			
		<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____			
	Date debt was incurred	Last 4 digits of account number _____			
	Add the dollar value of your entries in Column A on this page. Write that number here: <u>\$10,427.00</u>				

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Lendmark Financial Services
Name _____

On which line in Part 1 did you enter the creditor? 2.1

Last 4 digits of account number 2 7 0 0

P.O. Box 2969
Number Street _____

Covington GA 30015
City State ZIP Code _____

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number Street _____

City State ZIP Code _____

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number Street _____

City State ZIP Code _____

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number Street _____

City State ZIP Code _____

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number Street _____

City State ZIP Code _____

Name _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Number Street _____

City State ZIP Code _____

Fill in this information to identify your case:

Debtor 1	Leslee	Marsalis	Worrell
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Middle District of Georgia			
Case number (if known)			

Check if this is an
amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1	Last 4 digits of account number	\$	\$
Priority Creditor's Name			
Number Street			
City State ZIP Code			
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply.		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Check if this claim is for a community debt	Type of PRIORITY unsecured claim:		
Is the claim subject to offset?	<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> No <input type="checkbox"/> Yes			
2.2	Last 4 digits of account number	\$	\$
Priority Creditor's Name			
Number Street			
City State ZIP Code			
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply.		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<input type="checkbox"/> Check if this claim is for a community debt	Type of PRIORITY unsecured claim:		
Is the claim subject to offset?	<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than four priority unsecured claims fill out the Continuation Page of Part 2.

	Nonpriority Creditor's Name	Total claim						
		Number	Street	State	ZIP Code	Last 4 digits of account number	When was the debt incurred?	\$
4.1	Avant			IL	60601	2 2 1 1	7/28/2017	3,159.00
	Attn: Bankruptcy Notice 222 N. LaSalle Street, Ste. 1700							
	Chicago			IL	60601			
	City	State	ZIP Code					
	Who incurred the debt? Check one.						As of the date you file, the claim is: Check all that apply.	
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another						<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	<input type="checkbox"/> Check if this claim is for a community debt						Type of NONPRIORITY unsecured claim:	
							<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Personal Loan	
	Is the claim subject to offset?							
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes							
4.2	Big Picture Loans, LLC			IL	49969	2 6 5 3	12/19/2018	1,625.00
	Nonpriority Creditor's Name							
	P. O. Box 704							
	Number	Street						
	Watersmeet	MI	49969	City	State	ZIP Code		
	Who incurred the debt? Check one.						As of the date you file, the claim is: Check all that apply.	
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another						<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	<input type="checkbox"/> Check if this claim is for a community debt						Type of NONPRIORITY unsecured claim:	
							<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Personal Loan	
	Is the claim subject to offset?							
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes							
4.3	Calvary SPV, I			GA	30305	5 6 C S		13,586.23
	Nonpriority Creditor's Name							
	c/o Kramer, Linkie & Taylor 3565 Piedmont Rd., NE, Ste. 205							
	Number	Street						
	Atlanta	GA	30305	City	State	ZIP Code		
	Who incurred the debt? Check one.						As of the date you file, the claim is: Check all that apply.	
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another						<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	<input type="checkbox"/> Check if this claim is for a community debt						Type of NONPRIORITY unsecured claim:	
							<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Personal Loan	
	Is the claim subject to offset?							
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes							

Part 2: Your NONPRIORITY Unsecured Claims –Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.4

Credit One Bank

Nonpriority Creditor's Name

6801 S. Cimarron Road

Number Street

Las Vegas

NV 89113

City

State

ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 1 4 6 9

\$650.00

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Credit Card Charges

4.5

Department of Education/Navient

Nonpriority Creditor's Name

P. O. Box 9655

Number Street

Wilkes-Barre

PA 18773

City

State

ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 0 1 5 1

\$261,036.00

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Credit Card Charges

4.6

Discover Bank

Nonpriority Creditor's Name

P. O. Box 15316 Attn: Bankruptcy

Number Street

Wilmington

DE 19850

City

State

ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 3 1 1 0

\$1,216.00

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Credit Card Charges

Part 2: Your NONPRIORITY Unsecured Claims –Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.				Total claim
4.7	GEICO Federal Credit Union Nonpriority Creditor's Name 4400 Ocmulgee East Blvd. Number Street Macon GA 31217 City State ZIP Code			Last 4 digits of account number _____ \$2,434.00 When was the debt incurred? 12/15/2018 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Personal Loan
4.8	Green Trust Nonpriority Creditor's Name P. O. Box 340 Number Street Hays MT 59527 City State ZIP Code			Last 4 digits of account number _____ \$650.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Personal Loan
4.9	Island Finance, LLC dba WhiteHillsCash Nonpriority Creditor's Name Ft. Belknap Agency P. O. Box 330 Number Street Hays MT 59527 City State ZIP Code			Last 4 digits of account number 8 - 0 0 \$664.00 When was the debt incurred? 11/14/2018 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Personal Loan

Part 2: Your NONPRIORITY Unsecured Claims –Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.10

Mariner Finance
Nonpriority Creditor's Name

1489 Eisenhower Parkway
Number Street

Macon GA 31206
City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 3 7 1 8 \$2,913.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of **NONPRIORITY** unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Personal Loan _____

4.11

MoneyLion of Georgia, LLC
Nonpriority Creditor's Name

P. O. Box 1547
Number Street

Sandy UT 84091
City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 7 1 4 4 \$3,500.00

When was the debt incurred? 10/30/2018

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of **NONPRIORITY** unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Personal Loan _____

4.12

Niswi, LLC dba Amplify Funding
Nonpriority Creditor's Name

P. O. Box 542
Number Street

Lac du Flambeau WI 54538
City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 1 - 0 0 \$1,250.00

When was the debt incurred? 8/31/2018

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of **NONPRIORITY** unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Personal Loan _____

Part 2: Your NONPRIORITY Unsecured Claims –Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.					Total claim
<p>4.13 Nizhwaaswi, LLC dba Loan at Last Nonpriority Creditor's Name</p> <p>P. O. Box 1193 Number Street</p> <p>Lac du Flambeau WI 54548 City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>					<p>Last 4 digits of account number 5 - 0 0 \$750.00</p> <p>When was the debt incurred? 10/9/2018</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Personal Loan</u></p>
<p>4.14 Peoples Finance Nonpriority Creditor's Name</p> <p>108 Frederick Street Number Street</p> <p>Greenville SC 29607 City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>					<p>Last 4 digits of account number 4 1 0 1 \$2,482.00</p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Personal Loan</u></p>
<p>4.15 Rise Credit of Georgia Nonpriority Creditor's Name</p> <p>4150 International Plaza, Ste. 300 Number Street</p> <p>Fort Worth TX 76109 City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>					<p>Last 4 digits of account number 1 0 8 7 \$2,788.91</p> <p>When was the debt incurred? 11/24/2017</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Personal Loan</u></p>

Part 2: Your NONPRIORITY Unsecured Claims –Continuation PageAfter listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim

4.16

Spot Loan

Nonpriority Creditor's Name

P. O. Box 720

Number Street

Belcourt

ND 58316

City

State

ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number _____

\$867.00

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Personal Loan

4.17

Surge CC/Continental Finance

Nonpriority Creditor's Name

P. O. Box 3220

Number Street

Buffalo

NY 14240

City

State

ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 9 5 4 6

\$589.23

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Credit Card Charges

4.18

Synchrony Bank/Walmart

Nonpriority Creditor's Name

Attn: Bankruptcy Department P. O. Box 965060

Number Street

Orlando

FL

32896

City

State

ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 5 3 5 5

\$860.00

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Credit Card Charges

Part 2: Your NONPRIORITY Unsecured Claims –Continuation PageAfter listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim

4.19

TD Bank USA/Target

Nonpriority Creditor's Name

7000 Target Parkway N Mail Stop NCD-0450

Number Street

Brooklyn Park MN 55445

City

State

ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this claim is for a community debt**Is the claim subject to offset?**

No
 Yes

Last 4 digits of account number 8 9 6 2

\$881.00

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Credit Card Charges

4.20

Transform Credit

Nonpriority Creditor's Name

332 S. Michigan Avenue, Fl. 9

Number Street

Chicago IL 60604

City

State

ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this claim is for a community debt**Is the claim subject to offset?**

No
 Yes

Last 4 digits of account number 1 X 0 p

\$6,000.00

When was the debt incurred? 8/8/2018**As of the date you file, the claim is:** Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Personal Loan

4.21

Western Finance

Nonpriority Creditor's Name

1036 Gray Highway

Number Street

Macon GA 31211

City

State

ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this claim is for a community debt**Is the claim subject to offset?**

No
 Yes

Last 4 digits of account number

\$2,700.00

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Personal Loan

Part 2: Your NONPRIORITY Unsecured Claims –Continuation PageAfter listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim

4.22

Western Shamrock
Nonpriority Creditor's Name801 S ABE
Number Street
San Angelo TX 76903
City State ZIP Code**Who incurred the debt?** Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number 2 0 1 1

\$2,395.00

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Personal Loan

4.23

World Finance
Nonpriority Creditor's Name1211 Gray Highway, Ste. B
Number Street
Macon GA 31211
City State ZIP Code**Who incurred the debt?** Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$2,700.00

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Personal Loan

4.24

Nonpriority Creditor's Name

Number Street
City State ZIP Code**Who incurred the debt?** Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$_____

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Celtic Bank Corp.

Name

268 S. State Street, Ste. 300

Number Street

Salt Lake City, Utah 84111

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.17 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9 5 4 6

Greene & Cooper, LLP

Name

P. O. Box 1635

Number Street

Roswell, Georgia 30077

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.23 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name

Number Street

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name

Number Street

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name

Number Street

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name

Number Street

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name

Number Street

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159.
Add the amounts for each type of unsecured claim.

Total claim	
Total claims from Part 1	6a. Domestic support obligations 6a. \$ _____
	6b. Taxes and certain other debts you owe the government 6b. \$ _____
	6c. Claims for death or personal injury while you were intoxicated 6c. \$ _____
	6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. + \$ _____
	6e. Total. Add lines 6a through 6d. 6e. \$ _____
Total claim	
Total claims from Part 2	6f. Student loans 6f. \$ <u>261,036.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6g. \$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts 6h. \$ <u>0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6i. + \$ <u>54,660.37</u>
	6j. Total. Add lines 6f through 6i. 6j. \$ <u>315,696.37</u>

Fill in this information to identify your case:

Debtor	Leslee Marsalis Worrell		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Middle District of Georgia			
Case number (if known)			

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease			State what the contract or lease is for
2.1	Name			
	Number	Street		
	City	State	ZIP Code	
2.2	Name			
	Number	Street		
	City	State	ZIP Code	
2.3	Name			
	Number	Street		
	City	State	ZIP Code	
2.4	Name			
	Number	Street		
	City	State	ZIP Code	
2.5	Name			
	Number	Street		
	City	State	ZIP Code	

Fill in this information to identify your case:

Debtor 1	Leslee Marsalis Worrell		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Middle District of Georgia			
Case number (If known) _____			

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No
 Yes. In which community state or territory did you live? _____ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent _____

Number Street _____

City _____ State _____ ZIP Code _____

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Imogene Worrell

Name _____
142 Old Ridge Road
Number Street _____
Macon **Georgia** **31211**
State _____ ZIP Code _____
City _____

Schedule D, line _____
 Schedule E/F, line **4.14**
 Schedule G, line _____

3.2

Imogene Worrell

Name _____
142 Old Ridge Road
Number Street _____
Macon **Georgia** **31211**
State _____ ZIP Code _____
City _____

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

3.3

Name _____

Number Street _____
State _____ ZIP Code _____
City _____

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Fill in this information to identify your case:

Debtor 1	Leslee Marsalis Worrell		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Middle District of Georgia			
Case number (If known) _____			

Check if this is:

An amended filing
 A supplement showing post-petition chapter 13 income as of the following date:
 MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	Bodily Injury Adjuster	
Employer's name	GEICO	
Employer's address	One Geico Center Number Street _____ _____	
	Number Street _____ _____	
	Macon, GA 31296 City State ZIP Code	
	City State ZIP Code _____	
How long employed there?	2.5 years	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. <u>\$4,489.40</u>	<u>\$0.00</u>
3. Estimate and list monthly overtime pay.	3. <u>+\$0.00</u>	<u>+\$0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. <u>\$4,489.40</u>	<u>\$0.00</u>

Debtor 1

Leslee Marsalis Worrell

First Name Middle Name

Last Name

Case number (if known) _____

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	→ 4. <u>\$4,489.40</u>	<u>\$0.00</u>
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. <u>\$894.10</u>	<u>\$0.00</u>
5b. Mandatory contributions for retirement plans	5b. <u>\$134.70</u>	<u>\$0.00</u>
5c. Voluntary contributions for retirement plans	5c. <u>\$0.00</u>	<u>\$0.00</u>
5d. Required repayments of retirement fund loans	5d. <u>\$57.07</u>	<u>\$0.00</u>
5e. Insurance	5e. <u>\$111.11</u>	<u>\$0.00</u>
5f. Domestic support obligations	5f. <u>\$0.00</u>	<u>\$0.00</u>
5g. Union dues	5g. <u>\$0.00</u>	<u>\$0.00</u>
5h. Other deductions. Specify: _____	5h. <u>+ \$0.00</u>	<u>+ \$0.00</u>
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. <u>\$1,196.98</u>	<u>\$0.00</u>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. <u>\$3,292.42</u>	<u>\$0.00</u>
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. <u>\$0.00</u>	<u>\$0.00</u>
8b. Interest and dividends	8b. <u>\$0.00</u>	<u>\$0.00</u>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. <u>\$0.00</u>	<u>\$0.00</u>
8d. Unemployment compensation	8d. <u>\$0.00</u>	<u>\$0.00</u>
8e. Social Security	8e. <u>\$0.00</u>	<u>\$0.00</u>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. <u>\$N/A</u>	<u>\$0.00</u>
8g. Pension or retirement income	8g. <u>\$0.00</u>	<u>\$0.00</u>
8h. Other monthly income. Specify: <u>private tutoring</u>	8h. <u>+ \$45.00</u>	<u>+ \$0.00</u>
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. <u>\$45.00</u>	<u>\$0.00</u>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. <u>\$3,337.42</u>	<u>+ \$0.00</u> = <u>\$3,337.42</u>
11. State all other regular contributions to the expenses that you list in Schedule J.		
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.		
Specify: <u>None</u>	11. <u>+ \$0.00</u>	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12. <u>\$3,337.42</u>	
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		
Combined monthly income		

Fill in this information to identify your case:

Debtor 1	Leslee Marsalis Worrell	
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	Middle District of Georgia	
Case number (If known)		

Check if this is:

An amended filing
 A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

No

Do not list Debtor 1 and Debtor 2.

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

6

No

Yes

No

Yes

No

Yes

No

Yes

No

Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$1,315.00

If not included in line 4:

4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues

4a. \$0.00

4b. \$0.00

4c. \$50.00

4d. \$0.00

Debtor 1 **Leslee Marsalis Worrell**
 First Name Middle Name Last Name

Case number (if known) _____

Your expenses	
5. Additional mortgage payments for your residence , such as home equity loans	5. \$0.00
6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$200.00
6b. Water, sewer, garbage collection	6b. \$70.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$200.00
6d. Other. Specify: _____	6d. \$0.00
7. Food and housekeeping supplies	
8. Childcare and children's education costs	
9. Clothing, laundry, and dry cleaning	
10. Personal care products and services	
11. Medical and dental expenses	
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	
12. \$150.00	
13. Entertainment, clubs, recreation, newspapers, magazines, and books	
13. \$30.00	
14. Charitable contributions and religious donations	
14. \$50.00	
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$60.00
15b. Health insurance	15b. \$0.00
15c. Vehicle insurance	15c. \$270.00
15d. Other insurance. Specify: _____	15d. \$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	
16. \$0.00	
17. Installment or lease payments:	
17a. Car payments for Vehicle 1	17a. \$0.00
17b. Car payments for Vehicle 2	17b. \$0.00
17c. Other. Specify: _____	17c. \$
17d. Other. Specify: _____	17d. \$
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	
18. \$0.00	
19. Other payments you make to support others who do not live with you. Specify: _____	
19. \$0.00	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property	20a. \$0.00
20b. Real estate taxes	20b. \$0.00
20c. Property, homeowner's, or renter's insurance	20c. \$0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$0.00
20e. Homeowner's association or condominium dues	20e. \$0.00

Debtor 1

Leslee Marsalis Worrell

First Name

Middle Name

Last Name

Case number (if known)

21. Other. Specify: _____

21. **+\$0.00**

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

\$3,482.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

\$

22c. Add line 22a and 22b. The result is your monthly expenses.

\$3,482.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. **\$3,337.42**

23b. Copy your monthly expenses from line 22 above.

23b. **-\$3,482.00**

23c. Subtract your monthly expenses from your monthly income.

The result is your monthly net income.

23c. **\$-144.58**

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

Debtor lives with her mother. Expenses listed are for Debtor and her daughter only.

Fill in this information to identify your case:

Debtor 1	Leslee	Marsalis	Worrell
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Middle District of Georgia			
Case number	(If known)		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets	
Value of what you own	
1. <i>Schedule A/B: Property</i> (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	\$ 0.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$ 18,241.92
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	\$ 18,241.92

Part 2: Summarize Your Liabilities

Your liabilities	
Amount you owe	
2. <i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$ 10,427.00
3. <i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	+
	\$ 315,696.37
Your total liabilities	
	\$ 326,123.37

Part 3: Summarize Your Income and Expenses

4. <i>Schedule I: Your Income</i> (Official Form 106I)	
Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 3,337.42
5. <i>Schedule J: Your Expenses</i> (Official Form 106J)	
Copy your monthly expenses from line 22, Column A, of <i>Schedule J</i>	\$ 3,482.00

Debtor 1

Leslee Marsalis

First Name

Middle Name

Worrell

Last Name

Case number (if known) _____

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159.
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 5,056.60

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:

Total claim

From Part 4 on *Schedule E/F*, copy the following:

9a. Domestic support obligations (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$261,036.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. Total. Add lines 9a through 9f.	\$261,036.00

Fill in this information to identify your case:

Debtor 1 **Leslee Marsalis Worrell**
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **Middle District of Georgia**

Case number
(If known)

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____ . Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/Leslee Marsalis Worrell

Signature of Debtor 1

X

Signature of Debtor 2

Date 03/14/2019
MM / DD / YYYY

Date _____
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	First Name	Marsalis	Middle Name	Last Name
	Leslee			Worrell
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: Middle District of Georgia				
Case number (If known)				

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1
Number Street	From _____ To _____	Number Street	From _____ To _____
City	State ZIP Code	City	State ZIP Code
		<input type="checkbox"/> Same as Debtor 1	
Number Street	From _____ To _____	Number Street	From _____ To _____
City	State ZIP Code	City	State ZIP Code

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No
 Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Debtor 1 Leslee Marsalis Worrell
 First Name Middle Name Last Name

Case number (if known) _____

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$15,585.39	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$_____
For last calendar year: (January 1 to December 31, 2018) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$58,018.33	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$_____
For the calendar year before that: (January 1 to December 31, 2017) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$42,532.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$_____

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:		\$_____	\$_____	\$_____
		\$_____	\$_____	\$_____
		\$_____	\$_____	\$_____
For last calendar year: (January 1 to December 31, YYYY)		\$_____	\$_____	\$_____
		\$_____	\$_____	\$_____
		\$_____	\$_____	\$_____
For the calendar year before that: (January 1 to December 31, YYYY)		\$_____	\$_____	\$_____
		\$_____	\$_____	\$_____
		\$_____	\$_____	\$_____

Debtor 1 Leslee Marsalis Worrell
 First Name Middle Name Last Name

Case number (if known) _____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street	_____	_____	
City State ZIP Code	_____	_____	
Creditor's Name	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street	_____	_____	
City State ZIP Code	_____	_____	
Creditor's Name	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street	_____	_____	
City State ZIP Code	_____	_____	

Debtor 1 Leslee Marsalis Worrell
 First Name Middle Name Last Name

Case number (if known) _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		

Debtor 1 Leslee Marsalis Worrell
 First Name Middle Name Last Name

Case number (if known) _____

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title <u>Lendmark Financial</u>	Suit on account	Civil & Magistrate Court of Bibb County Court Name Room 402A, Bibb County Courthouse Number Street	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number <u>38752-S</u>		Macon GA 31201 City State ZIP Code	
Case title _____		Court Name _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____		Number Street _____	
		City State ZIP Code	

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

	Describe the property	Date	Value of the property
Creditor's Name _____	_____	_____	\$ _____
Number Street _____	Explain what happened	<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.	
City _____ State _____ ZIP Code _____	_____	_____	\$ _____
Creditor's Name _____	Describe the property	Date	Value of the property
Number Street _____	Explain what happened	<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.	
City _____ State _____ ZIP Code _____	_____	_____	\$ _____

Debtor 1 Leslee Marsalis Worrell
First Name Middle Name Last Name

Case number (if known) _____

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No

Yes. Fill in the details.

Creditor's Name	Describe the action the creditor took	Date action was taken	Amount
Number Street			\$
City	State ZIP Code	Last 4 digits of account number: XXXX-	

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No

Yes

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
<p>Person to Whom You Gave the Gift</p> <hr/> <hr/> <hr/>			\$ _____
			\$ _____

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			
		\$ _____	
		\$ _____	
City	State	ZIP Code	
Person's relationship to you _____			

Debtor 1 Leslee Marsalis Worrell
First Name Middle Name Last Name

Case number (if known) _____

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No
 Yes. Fill in the details for each gift or contribution.

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No
 Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .		\$ _____

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No
 Yes. Fill in the details.

<u>Emmett L. Goodman, Jr., LLC</u> Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<u>544 Mulberry Street, Ste. 800</u> Number Street	atty fees/costs	<u>03/06/19</u>	<u>\$1,835.00</u>
<u>Macon</u> City	<u>GA</u> State	<u>31201</u> ZIP Code	<u>\$</u>
<u>bkydept@goodmanlaw.org</u> Email or website address			
<u>Person Who Made the Payment, if Not You</u>			

Debtor 1 Leslee Marsalis Worrell
 First Name Middle Name Last Name

Case number (if known) _____

Dollar Learning Foundation

Person Who Was Paid

Number Street _____

City _____ State _____ ZIP Code _____

Email or website address _____

Person Who Made the Payment, if Not You _____

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	<u>03/05/19</u>	<u>\$17.50</u>
	_____	<u>\$</u> _____

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid _____
 Number Street _____
 City _____ State _____ ZIP Code _____

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	_____	<u>\$</u> _____
	_____	<u>\$</u> _____

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Person Who Received Transfer _____
 Number Street _____
 City _____ State _____ ZIP Code _____

Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made

Person's relationship to you _____
 Person Who Received Transfer _____
 Number Street _____
 City _____ State _____ ZIP Code _____
 Person's relationship to you _____

--	--	-------

Debtor 1 Leslee Marsalis Worrell
 First Name Middle Name Last Name

Case number (if known) _____

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No
 Yes. Fill in the details.

Description and value of the property transferred	Date transfer was made
Name of trust _____	_____
_____	_____

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No
 Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution _____	XXXX-_____	<input type="checkbox"/> Checking _____ <input type="checkbox"/> Savings _____ <input type="checkbox"/> Money market _____ <input type="checkbox"/> Brokerage _____ <input type="checkbox"/> Other _____	\$ _____
Number Street _____	XXXX-_____	<input type="checkbox"/> Checking _____ <input type="checkbox"/> Savings _____ <input type="checkbox"/> Money market _____ <input type="checkbox"/> Brokerage _____ <input type="checkbox"/> Other _____	\$ _____
City _____ State _____ ZIP Code _____	XXXX-_____	<input type="checkbox"/> Checking _____ <input type="checkbox"/> Savings _____ <input type="checkbox"/> Money market _____ <input type="checkbox"/> Brokerage _____ <input type="checkbox"/> Other _____	\$ _____
City _____ State _____ ZIP Code _____	XXXX-_____	<input type="checkbox"/> Checking _____ <input type="checkbox"/> Savings _____ <input type="checkbox"/> Money market _____ <input type="checkbox"/> Brokerage _____ <input type="checkbox"/> Other _____	\$ _____

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No
 Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution _____	Name _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Number Street _____	Number Street _____	
City _____ State _____ ZIP Code _____	_____	

Debtor 1 Leslee Marsalis Worrell
 First Name Middle Name Last Name

Case number (if known) _____

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Name of Storage Facility _____	Name _____	
Number Street _____	Number Street _____	
City State ZIP Code _____		
City _____	State _____	ZIP Code _____

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Where is the property?	Describe the property	Value
Owner's Name _____	_____	\$ _____
Number Street _____	Number Street _____	
City _____	State _____	ZIP Code _____

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site _____	Governmental unit _____	_____
Number Street _____	Number Street _____	
City _____	State _____	ZIP Code _____
City _____	State _____	ZIP Code _____

Debtor 1 Leslee Marsalis Worrell
 First Name Middle Name Last Name

Case number (if known) _____

25. Have you notified any governmental unit of any release of hazardous material?

No

Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
		City State ZIP Code	
City	State	ZIP Code	

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title		
Court Name		
Number Street		
Case number		
City State ZIP Code		

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street		EIN: _____
City State ZIP Code		Dates business existed
		From _____ To _____
Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
Number Street		EIN: _____
City State ZIP Code		Dates business existed
		From _____ To _____

Debtor 1

Leslee Marsalis Worrell

First Name

Middle Name

Last Name

Case number (if known)

Business Name

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Number Street

Name of accountant or bookkeeper

EIN: _____ - _____

City State ZIP Code

Dates business existed

From _____ To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Date issued

Name

MM / DD / YYYY

Number Street

City State ZIP Code

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

 /s/ Leslee Marsalis Worrell

Signature of Debtor 1



Signature of Debtor 2

Date 03/14/2019

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	Leslee Marsalis Worrell	
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the: Middle District Of Georgia		
Case number (If known)		

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.

Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

- For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: 401(k) Loan	<input checked="" type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt: 401(k)		
Creditor's name:	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt:		
Creditor's name:	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt:		
Creditor's name:	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt:		

Your name

Leslee Marsalis Worrell

First Name

Middle Name

Last Name

Case number (If known) _____

Part 2:**List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	<input type="checkbox"/> No
Description of leased property:	<input type="checkbox"/> Yes
Lessor's name:	<input type="checkbox"/> No
Description of leased property:	<input type="checkbox"/> Yes
Lessor's name:	<input type="checkbox"/> No
Description of leased property:	<input type="checkbox"/> Yes
Lessor's name:	<input type="checkbox"/> No
Description of leased property:	<input type="checkbox"/> Yes
Lessor's name:	<input type="checkbox"/> No
Description of leased property:	<input type="checkbox"/> Yes
Lessor's name:	<input type="checkbox"/> No
Description of leased property:	<input type="checkbox"/> Yes
Lessor's name:	<input type="checkbox"/> No
Description of leased property:	<input type="checkbox"/> Yes

Part 3:**Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/Leslee Marsalis Worrell

Signature of Debtor 1

Date 03/14/2019
MM / DD / YYYY

X

Signature of Debtor 2

Date
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	Leslee Marsalis Worrell		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: MIDDLE DISTRICT OF GEORGIA			
Case number (If known)			

Check one box only as directed in this form and in
Form 122A-1Supp:

1. There is no presumption of abuse.

2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).

3. The Means Test does not apply now because of qualified military service but it could apply later.

 Check if this is an amended filing

61,794.00

Official Form 122A-1**Chapter 7 Statement of Your Current Monthly Income**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

Married and your spouse is NOT filing with you. You and your spouse are:

Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.

Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$5,014.94	\$_____
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$0.00	\$_____
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$0.00	\$_____
5. Net income from operating a business, profession, or farm	Debtor 1	Debtor 2
Gross receipts (before all deductions)	\$_____	\$_____
Ordinary and necessary operating expenses	-\$_____	-\$_____
Net monthly income from a business, profession, or farm	\$0.00	\$_____
	Copy here ➔	\$0.00
6. Net income from rental and other real property	Debtor 1	Debtor 2
Gross receipts (before all deductions)	\$_____	\$_____
Ordinary and necessary operating expenses	-\$_____	-\$_____
Net monthly income from rental or other real property	\$0.00	\$_____
	Copy here ➔	\$0.00
7. Interest, dividends, and royalties		\$0.00

Debtor 1 **Leslee Marsalis Worrell**
 First Name Middle Name Last Name

Case number (if known) _____

Column A
Debtor 1

Column B
Debtor 2 or
non-filing spouse

8. Unemployment compensation

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 

For you \$ 0.00
 For your spouse \$ _____

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

private tutoring _____

\$0.00 _____

Total amounts from separate pages, if any.

\$41.66 _____
 \$ _____

+ \$0.00 _____ + \$ _____

11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$5,056.60 + **\$** = **\$5,056.60**

Total current monthly income

Part 2: Determine Whether the Means Test Applies to You

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11 **Copy line 11 here ➔** **\$5,056.60**
 Multiply by 12 (the number of months in a year).
 12b. The result is your annual income for this part of the form. **12b.** **\$60,679.20**

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

Georgia

Fill in the number of people in your household.

2

Fill in the median family income for your state and size of household. **13.** **\$61,794.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*
 Go to Part 3.

14b. Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.*
 Go to Part 3 and fill out Form 122A-2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/Leslee Marsalis Worrell

Signature of Debtor 1

Date **03/14/2019**
 MM / DD / YYYY

X

Signature of Debtor 2

Date
 MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill in this information to identify your case:

Debtor 1	Leslee Marsalis Worrell		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: MIDDLE DISTRICT OF GEORGIA			
Case number (If known)			

Check if this is an amended filing

Official Form 122A-1Supp

Statement of Exemption from Presumption of Abuse Under § 707(b)(2) 12/15

File this supplement together with *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

Part 1: Identify the Kind of Debts You Have

1. Are your debts primarily consumer debts? *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101).

No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

Yes. Go to Part 2.

Part 2: Determine Whether Military Service Provisions Apply to You

2. Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))?

No. Go to line 3.

Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).

No. Go to line 3.

Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

3. Are you or have you been a Reservist or member of the National Guard?

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Check any one of the following categories that applies:

I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.

I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on _____, which is fewer than 540 days before I file this bankruptcy case.

I am performing a homeland defense activity for at least 90 days.

I performed a homeland defense activity for at least 90 days, ending on _____, which is fewer than 540 days before I file this bankruptcy case.

If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, *The Means Test does not apply now*, and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The *exclusion period* means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later.

Fill in this information to identify your case:

Debtor 1 **Leslee Marsalis Worrell**
First Name Middle Name Last Name
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: **MIDDLE DISTRICT OF GEORGIA**
Case number (If known) _____

Check the appropriate box as directed in lines 40 or 42:

According to the calculations required by this Statement:

1. There is no presumption of abuse.
 2. There is a presumption of abuse.

Check if this is an amended filing

Official Form 122A-2

Chapter 7 Means Test Calculation

04/16

To fill out this form, you will need your completed copy of *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Determine Your Adjusted Income

1. Copy your total current monthly income.....Copy line 11 from Official Form 122A-1 here ➔ \$ _____

2. Did you fill out Column B in Part 1 of Form 122A-1?

No. Fill in \$0 for the total on line 3.
 Yes. Is your spouse filing with you?
 No. Go to line 3.
 Yes. Fill in \$0 for the total on line 3.

3. Adjust your current monthly income by subtracting any part of your spouse's income not used to pay for the household expenses of you or your dependents. Follow these steps:

On line 11, Column B of Form 122A-1, was any amount of the income you reported for your spouse NOT regularly used for the household expenses of you or your dependents?

No. Fill in 0 for the total on line 3.
 Yes. Fill in the information below:

State each purpose for which the income was used

For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents

Fill in the amount you are subtracting from your spouse's income

\$ _____

\$ _____

+ \$ _____

Total.

\$ _____ 0.00

Copy total here ➔ - \$ _____ 0.00

4. Adjust your current monthly income. Subtract the total on line 3 from line 1.

Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to *you*, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. \$ _____

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person \$ _____

7b. Number of people who are under 65 X _____

7c. **Subtotal.** Multiply line 7a by line 7b. \$ _____ **Copy here ➔** \$ _____

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person \$ _____

7e. Number of people who are 65 or older X _____

7f. **Subtotal.** Multiply line 7d by line 7e. \$ _____ **Copy here ➔** + \$ _____

7g. **Total.** Add lines 7c and 7f.....

\$ _____

Copy total here ➔

\$ _____

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- **Housing and utilities – Insurance and operating expenses**
- **Housing and utilities – Mortgage or rent expenses**

To answer the questions in lines 8-9, use the U.S. Trustee Program chart.

To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities – Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ _____

9. **Housing and utilities – Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. \$ _____

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of the creditor	Average monthly payment
_____	\$ _____
_____	\$ _____
_____	+ \$ _____
Total average monthly payment	\$ _____
	Copy here →
	-\$ _____
	Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. \$ _____

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. \$ _____

Explain why: _____

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.

- 0. Go to line 14.
- 1. Go to line 12.
- 2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area. \$ _____

13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1**Describe Vehicle 1:**

13a. Ownership or leasing costs using IRS Local Standard. \$ _____

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment
_____	\$ _____

+	\$ _____
---	----------

Total average monthly payment	\$ _____
-------------------------------	----------

Copy here →

— \$ _____

Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense

Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0.

\$ _____

Copy net Vehicle 1 expense here ... →

\$ _____

Vehicle 2**Describe Vehicle 2:**

13d. Ownership or leasing costs using IRS Local Standard. \$ _____

13e. Average monthly payment for all debts secured by Vehicle 2.

Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment
_____	\$ _____

+	\$ _____
---	----------

Total average monthly payment	\$ _____
-------------------------------	----------

Copy here →

— \$ _____

Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense

Subtract line 13e from 13d. If this amount is less than \$0, enter \$0.

\$ _____

Copy net Vehicle 2 expense here ... →

\$ _____

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation. \$ _____

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation. \$ _____

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. **Taxes:** The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. \$ _____
Do not include real estate, sales, or use taxes.

17. **Involuntary deductions:** The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. \$ _____
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.

18. **Life insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. \$ _____

19. **Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. \$ _____
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.

20. **Education:** The total monthly amount that you pay for education that is either required:
 as a condition for your job, or
 for your physically or mentally challenged dependent child if no public education is available for similar services. \$ _____

21. **Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. \$ _____
Do not include payments for any elementary or secondary school education.

22. **Additional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. \$ _____
Payments for health insurance or health savings accounts should be listed only in line 25.

23. **Optional telephones and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. \$ _____
Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.
+ \$ _____

24. **Add all of the expenses allowed under the IRS expense allowances.** \$ _____
Add lines 6 through 23.

Additional Expense Deductions

These are additional deductions allowed by the Means Test.

Note: Do not include any expense allowances listed in lines 6-24.

25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health insurance \$ _____

Disability insurance \$ _____

Health savings account + \$ _____

Total \$ _____ Copy total here ➔ \$ _____

Do you actually spend this total amount?

 No. How much do you actually spend? \$ _____ Yes

26. Continuing contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b). \$ _____

27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. \$ _____

By law, the court must keep the nature of these expenses confidential.

28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.

If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. \$ _____

You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary. \$ _____

29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$160.42* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. \$ _____

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. \$ _____

* Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment.

30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. \$ _____

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2). + \$ _____

32. Add all of the additional expense deductions.

Add lines 25 through 31.

\$ _____

Deductions for Debt Payment

33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Mortgages on your home:**Average monthly payment**

33a. Copy line 9b here ➔ \$ _____

Loans on your first two vehicles:

33b. Copy line 13b here. ➔ \$ _____

33c. Copy line 13e here. ➔ \$ _____

33d. List other secured debts:

Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?	
_____	_____	<input type="checkbox"/> No	\$ _____
_____	_____	<input type="checkbox"/> Yes	\$ _____
_____	_____	<input type="checkbox"/> No	\$ _____
_____	_____	<input type="checkbox"/> Yes	\$ _____
_____	_____	<input type="checkbox"/> No	+ \$ _____
_____	_____	<input type="checkbox"/> Yes	

33e. Total average monthly payment. Add lines 33a through 33d. ➔ \$ _____

Copy total here ➔

\$ _____

34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?

No. Go to line 35.

Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount
_____	_____	\$ _____ ÷ 60 =	\$ _____
_____	_____	\$ _____ ÷ 60 =	\$ _____
_____	_____	\$ _____ ÷ 60 =	+ \$ _____
		Total	\$ _____

Copy total here ➔

\$ _____

35. Do you owe any priority claims such as a priority tax, child support, or alimony — that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.

No. Go to line 36.

Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims \$ _____ ÷ 60 = \$ _____

36. **Are you eligible to file a case under Chapter 13? 11 U.S.C. § 109(e).**

For more information, go online using the link for *Bankruptcy Basics* specified in the separate instructions for this form. *Bankruptcy Basics* may also be available at the bankruptcy clerk's office.

No. Go to line 37.

Yes. Fill in the following information.

Projected monthly plan payment if you were filing under Chapter 13 \$ _____

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). X _____

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

Average monthly administrative expense if you were filing under Chapter 13

\$ _____ Copy total here ➔ \$ _____

37. **Add all of the deductions for debt payment.**

Add lines 33e through 36.

\$ _____

Total Deductions from Income38. **Add all of the allowed deductions.**

Copy line 24, *All of the expenses allowed under IRS expense allowances* \$ _____

Copy line 32, *All of the additional expense deductions* \$ _____

Copy line 37, *All of the deductions for debt payment* + \$ _____

Total deductions \$ _____ Copy total here ➔ \$ _____

Part 3: Determine Whether There Is a Presumption of Abuse39. **Calculate monthly disposable income for 60 months**

39a. Copy line 4, *adjusted current monthly income* \$ _____

39b. Copy line 38, *Total deductions* - \$ _____

39c. Monthly disposable income. 11 U.S.C. § 707(b)(2). \$ _____

Subtract line 39b from line 39a.

Copy here ➔ \$ _____

For the next 60 months (5 years) x 60

39d. **Total.** Multiply line 39c by 60.

\$ _____ Copy here ➔ \$ _____

40. **Find out whether there is a presumption of abuse.** Check the box that applies:

The line 39d is less than \$7,700*. On the top of page 1 of this form, check box 1, *There is no presumption of abuse*. Go to Part 5.

The line 39d is more than \$12,850*. On the top of page 1 of this form, check box 2, *There is a presumption of abuse*. You may fill out Part 4 if you claim special circumstances. Then go to Part 5.

The line 39d is at least \$7,700*, but not more than \$12,850*. Go to line 41.

* Subject to adjustment on 4/01/19, and every 3 years after that for cases filed on or after the date of adjustment.

41. 41a. **Fill in the amount of your total nonpriority unsecured debt.** If you filled out *A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules* (Official Form 106Sum), you may refer to line 3b on that form. \$ _____

x .25

41b. **25% of your total nonpriority unsecured debt.** 11 U.S.C. § 707(b)(2)(A)(i)(I).
Multiply line 41a by 0.25.

\$ _____

Copy here →

\$ _____

42. Determine whether the income you have left over after subtracting all allowed deductions is enough to pay 25% of your unsecured, nonpriority debt.

Check the box that applies:

Line 39d is less than line 41b. On the top of page 1 of this form, check box 1, *There is no presumption of abuse.*

Go to Part 5.

Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check box 2, *There is a presumption of abuse.* You may fill out Part 4 if you claim special circumstances. Then go to Part 5.

Part 4: Give Details About Special Circumstances

43. Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for which there is no reasonable alternative? 11 U.S.C. § 707(b)(2)(B).

No. Go to Part 5.

Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25.

You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments.

Give a detailed explanation of the special circumstances

Average monthly expense or income adjustment

\$ _____

\$ _____

\$ _____

\$ _____

Part 5: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

 /s/Leslee Marsalis Worrell

Signature of Debtor 1



Signature of Debtor 2

Date 03/14/2019
MM / DD / YYYY

Date _____
MM / DD / YYYY

United States Bankruptcy Court
MIDDLE DISTRICT OF GEORGIA

In re Leslee Marsalis Worrell

Case No. _____

Debtor

Chapter 7 _____

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$1,500.00

Prior to the filing of this statement I have received \$1,500.00

Balance Due \$0.00

2. The source of the compensation paid to me was:

Debtor

Other (specify)

3. The source of compensation to be paid to me is:

Debtor

Other (specify)

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

- d. ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:
Any adversary proceeding, hearings, trials, motions or adjudications relative to the bankruptcy proceeding, whatsoever. Debtor agrees to pay for all costs including hiring of experts, professionals or otherwise necessary for the prosecution of this case. This representation does not cover any other legal matter unless a written contract is entered into between the debtor and attorney or the firm.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

March 14, 2019
Date

/s/s/ Daniel L. Wilder
Signature of Attorney

Emmett L. Goodman, Jr., LLC
Name of law firm

UNITED STATES BANKRUPTCY COURT
MIDDLE DISTRICT OF GEORGIA

In re

Chapter 7

Leslee Marsalis Worrell

Case No.

Debtors.

STATEMENT OF MONTHLY Gross INCOME

The undersigned certifies the following is the debtor's monthly income.

Income:	Debtor
Six months ago	\$ 4,144.07
Five months ago	\$ 4,144.07
Four months ago	\$ 4,144.07
Three months ago	\$ 4,144.06
Two months ago	\$ 4,144.07
Last month	\$ 9,369.29
Income from other sources	\$ 250.00
Total Gross income for six months preceding filing	\$ 30,339.63
Average Monthly Gross Income	\$ 5,056.61
Average Monthly Net Income (from Schedule I)	\$ 3,529.19

Dated: March 14, 2019

/s/Leslee Marsalis Worrell

Leslee Marsalis Worrell
Debtor

UNITED STATES BANKRUPTCY COURT

MIDDLE DISTRICT OF GEORGIA

In Re:

Case No.

Leslee Marsalis Worrell

Debtor(s)

**DECLARATION RE: ELECTRONIC FILING OF
PETITION, SCHEDULES & STATEMENTS****PART I - DECLARATION OF PETITIONER**

I (WE) Leslee Marsalis Worrell, the undersigned debtor(s), **hereby declare under penalty of perjury** that the information provided in the electronically filed petition, statements, and schedules is true and correct and that I signed these documents prior to electronic filing. I consent to my attorney sending my petition, statements and schedules to the United States Bankruptcy Court. I understand that this DECLARATION RE: ELECTRONIC FILING is to be executed at the First Meeting of Creditors and filed with the Trustee. I understand that failure to file the signed and dated original of this DECLARATION may cause my case to be dismissed pursuant to 11 U.S.C. § 707(a)(3) without further notice. I (we) further declare under penalty of perjury that I (we) signed the original Statement of Social Security Number (s), (Official Form B21), prior to the electronic filing of the petition and have verified the 9-digit social security number displayed on the Notice of Meeting of Creditors to be accurate.

If petitioner is an individual whose debts are primarily consumer debts and who has chosen to file under a chapter: I am aware that I may proceed under chapter 7, 11, 12 or 13 of Title 11, United States Code, understand the relief available under each chapter, and choose to proceed under this chapter. I request relief in accordance with the chapter specified in this petition. I (WE) and, the undersigned debtor(s), **hereby declare under penalty of perjury** that the information provided in the electronically filed petition, statements, and schedules is true and correct.

If petitioner is a corporation or partnership: I declare under a penalty of perjury that the information provided in the electronically filed petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter specified in this petition.

If petitioner files an application to pay filing fees in installments: I certify that I completed an application to pay the filing fee in installments. I am aware that if the fee is not paid within 120 days of the filing date of filing the petition, the bankruptcy case may be dismissed and, if dismissed, I may not receive a discharge of my debts.

Dated: March 14, 2019Signed: /s/ Leslee Marsalis Worrell
(Applicant)

(Joint Applicant)

PART II - DECLARATION OF ATTORNEY

I **declare under penalty of perjury** that the debtor(s) signed the petition, schedules, statements, etc., including the Statement of Social Security Number(s) (Official Form B21) before I electronically transmitted the petition, schedules, and statements to the United States Bankruptcy Court, and have followed all other requirements in Administrative Orders and Administrative Procedures, including submission of the electronic entry of the debtor(s) Social Security number into the Court's electronic records. If an individual, I further declare that I have informed the petitioner (if an individual) that [he or she] may qualify to proceed under chapter 7, 11, 12 or 13 of Title 11, United States Code, and have explained the relief available under each chapter. This declaration is based on the information of which I have knowledge.

Dated: March 14, 2019Attorney for Debtor(s) /s//s/ Daniel L. WilderDaniel L. WilderAddress of Attorney 544 Mulberry Street, Suite 800Macon, Georgia 31201-

401 (k) Loan
4634 Presidential Parkway
Macon, GA 31206

Avant
Attn: Bankruptcy Notice
222 N. LaSalle Street, Ste. 1700
Chicago, IL 60601

Big Picture Loans, LLC
P. O. Box 704
Watersmeet, MI 49969

Cavalry SPV, I
c/o Kramer, Linkie & Taylor
3565 Piedmont Rd., NE, Ste. 205
Atlanta, GA 30305

Celtic Bank Corp.
268 S. State Street, Ste. 300
Salt Lake City, UT 84111

Credit One Bank
6801 S. Cimarron Road
Las Vegas, NV 89113

Department of Education/Navient
P. O. Box 9655
Wilkes-Barre, PA 18773

Discover Bank
P. O. Box 15316
Attn: Bankruptcy
Wilmington, DE 19850

GEICO Federal Credit Union
4400 Ocmulgee East Blvd.
Macon, GA 31217

Green Trust
P. O. Box 340
Hays, MT 59527

Greene & Cooper, LLP
P. O. Box 1635
Roswell, GA 30077

Imogene Worrell
142 Old Ridge Road
Macon, GA 31211

Island Finance, LLC dba WhiteHillsCash
Ft. Belknap Agency
P. O. Box 330
Hays, MT 59527

Lendmark Financial Services
P. O. Box 2969
Covington, GA 30015

Mariner Finance
1489 Eisenhower Parkway
Macon, GA 31206

MoneyLion of Georgia, LLC
P. O. Box 1547
Sandy, UT 84091

Niswi, LLC dba Amplify Funding
P. O. Box 542
Lac du Flambeau, WI 54538

Nizhwaaswi, LLC dba Loan at Last
P. O. Box 1193
Lac du Flambeau, WI 54548

Peoples Finance
108 Frederick Street
Greenville, SC 29607

Rise Credit of Georgia
4150 International Plaza, Ste. 300
Fort Worth, TX 76109

Spot Loan
P. O. Box 720
Belcourt, ND 58316

Surge CC/Continental Finance
P. O. Box 3220
Buffalo, NY 14240

Synchrony Bank/Walmart
Attn: Bankruptcy Department
P. O. Box 965060
Orlando, FL 32896

TD Bank USA/Target
7000 Target Parkway N
Mail Stop NCD-0450
Brooklyn Park, MN 55445

Transform Credit
332 S. Michigan Avenue, Fl. 9
Chicago, IL 60604

Western Finance
1036 Gray Highway
Macon, GA 31211

Western Shamrock
801 S ABE
San Angelo, TX 76903

World Finance
1211 Gray Highway, Ste. B
Macon, GA 31211

UNITED STATES BANKRUPTCY COURT
Middle District of Georgia

In re: Leslee Marsalis Worrell Case No. _____
Debtors Chapter 7 _____

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under penalty of perjury that the attached Master Mailing List of creditors is complete, correct and consistent with the debtor's schedules pursuant to Local Bankruptcy Rules and I/we assume all responsibility for errors and omissions.

Dated: March 14, 2019

Signed: /s/Leslee Marsalis Worrell

Dated: _____

Signed: _____

/s//s/ Daniel L. Wilder
Daniel L. Wilder
Attorney for Debtor(s)
Bar no.: 141448
544 Mulberry Street, Suite 800
Macon, Georgia 31201-
Telephone No: (478) 745-5415
Fax No: (478) 746-8655

E-mail address:
dwilder@goodmanlaw.org